

2022 QIO CNRS Self-Assessment

Quality is never an accident.

It is always the result of intelligent effort.

-John Ruskin



Medicaid Quality Oversight

- Community-based neurobehavioral rehabilitation services (CNRS) Provider Quality Management Self-Assessment process was developed in 2018 as one method for the state to gather data to support the quality framework performance measures as required by the Centers for Medicare and Medicaid Services (CMS).
- The annual provider self-assessment process mirrors a CMS review process by requiring providers to attest to a system of monitoring their own performance and establishing corrective action, if needed, through this quality oversight process.



Medicaid Quality Oversight (continued)

- Telligen contracts with the state of lowa as the Quality Improvement Organization (QIO) for our state's long term care population.
- QIO HCBS team provides oversight for approximately 460 enrolled HCBS and Habilitation providers, as well as CNRS. Primary functions include:
 - Quality oversight reviews
 - Technical assistance
 - HCBS and CNRS provider applications
 - Critical incident management
 - Complaint investigation
 - Individual Participant Experience Surveys (IPES)
 - Community-Based Case Manager (CBCM) service plan ride-alongs



CNRS Review Process

- QIO consists of six regional specialists and one incident and complaint specialist to conduct quality oversight reviews.
- CNRS providers are reviewed on a 3-year review cycle.
- Reviews are evidence-based, using provider's policy and procedure, member file, and staff file information.
- Can result in the issuance of corrective action plans (CAPs) which are detailed plans that providers create to explain how they will remediate the issue, after a period of time evidence of implementation of that CAP is requested in order to verify the provider has met compliance.



Quality Oversight by the Provider

- Quality Oversight Process is based on an ongoing cycle of
 - Discovery intentional, structured, and measured review of evidence to determine if your agency policies and practices are being implemented as required. Prior to conducting discovery, a goal or threshold is set for determining whether remediation is needed.
 - Remediation data from the Discovery phase may identify problem areas. Providers create an action plan to remediate the problem.
 - **Improvement** —analysis is conducted to determine success.
- Self-assessment is the foundation from which to build your own internal oversight processes
- Completion of the SA form requires providers to ask if they have policies and processes in place, and can they provide evidence of lowa CNRS rules and requirements and best practice.
 - That evidence should be reviewed regularly as part of Discovery
- Helps improve the outcome of your review.



Self-Assessment 2022

- If you're new here
 - This is an annual requirement
 - Participation is required in order to maintain your enrollment as a CNRS provider
 - Failure to submit required documents may result in a sanction of payment suspension
- If you're a veteran
 - See above!
 - Clarified messaging
 - Re-ordered information
 - Always improving



The Details

- Fillable PDF document located here: https://dhs.iowa.gov/ime/members/medicaid-a-to-z/cnrs/sa
- Requires signatures from your agency's president/CEO and Board President/Chairperson
- Due date of December 31, 2022
- Submission via email to <u>CNRS@dhs.state.ia.us</u>
- Following submission
 - Your specialist will notify you that revisions are required or
 - You will receive a letter of acceptance



Instructions For Completion – SA

- Save to your computer or local drive before completing
- Do not submit a self-assessment that is printed, scanned, or copied
- Read all instructions
- Form features
 - Blue text is an active link which takes you to various sections within the form or to external resources
 - Use tab key to move through checkboxes
 - Free-text boxes
 - Electronic signature



Section I. Organization Details

- Main Office Information
- EIN number (9 digit number)
- All applicable agency NPIs (10 digit numbers)
- Legal business name, if different from name you are doing business as(DBA)
- Correct email addresses
- Section II. Service Locations
 - Provides space for up to nine locations where CNRS is provided.
 - Contact your specialist for a separate form if you have more than nine locations



Section III. Self-Assessment Questionnaire

- Select the most appropriate response.
 - Yes = your organization meets the standards and can provide verifiable evidence. The standard may be required by Iowa Medicaid law or rule, your own internal policy, as best practice, or because of another oversight entity outside of Iowa Medicaid.
 - No = your organization does not meet the standard or cannot provide evidence, but are required to by law, rule, your own policy, or the standard is otherwise necessary for the services your organization is enrolled to provide.
 - If you select No, you must describe a plan in the designated box that explains what you will do to correct the problem with specific timelines for achieving compliance.
 - This plan may be referred to a remediation plan, corrective action plan, or "CAP".
 - NA = standard is not required by law, rule, or organization policy for the services you are enrolled to provide.
- At the end of each topic, there is a free-text box for your organization to highlight how your organization meets or exceeds the requirements.



Section III. Self-Assessment Questionnaire (Continued)

- Section III. Self-Assessment Questionnaire consists of the following areas:
 - A. Organizational Standards
 - To provide quality services to members, organizations need to have sound administrative and organizational practices and a high degree of accountability and integrity. Organizations should have a planned, systematic, organization-wide approach to designing, measuring, evaluating, and improving its level of performance.
 - B. Personnel and Training
 - Providers need to have qualified employees commensurate with the needs of the members served and requirements for the employee's position. Employees should be competent to perform duties and interact with members.



Section III. Self-Assessment Questionnaire (Continued)

- C. Policies and Procedures
 - This section focuses on the core set of policies and procedures which guide the provision of services. Policies and procedures outline day-to-day operations, ensure compliance with laws and regulations, and guide staff. Policies and procedures are implemented so that members receive fair, equal, consistent, and positive service experiences.



Section IV. Guarantee of Accuracy

- Attestation to the accuracy of your self-assessment responses
- Select Accreditation or Licensing each CNRS location has
 - Include start and end dates
- Digitally sign by typing your name within the document



Submission

- Do not submit a self-assessment that is printed, scanned, or copied
- Email both documents to <u>CNRS@dhs.state.ia.us</u>
 - Your agency's name in the Subject line
- Due by December 31st, 2022
 - Early submission is strongly recommended.
- Implementation of corrective action must be completed within 30 days.
- Failure to submit the required 2022 Quality Management Self-Assessment will jeopardize your agency's Medicaid enrollment and may result in sanction of payment suspension.



PROVIDER NAME	QIO SPECIALIST AND CONTACT INFORMATION
Community NeuroRehab of Iowa, Inc.	Lyndsey Hamill lhamill@dhs.state.ia.us
NeuroRestorative Iowa	Jason Scott jscott2@dhs.state.ia.us
On With Life	Lyndsey Hamill lhamill@dhs.state.ia.us
Opportunities Unlimited	Julene Shelton-Beedle jshelto@dhs.state.ia.us
Neuro RehabCare of Waterloo	Rebecca Barber <u>rbarber@dhs.state.ia.us</u>



Resources

- Self-Assessment Website <u>https://dhs.iowa.gov/ime/members/medicaid-a-to-z/cnrs/sa</u>
 - Frequently Asked Questions (FAQs)
 - Self-Assessment Training Slides
- Link to regional specialists
 - https://dhs.iowa.gov/ime/members/medicaid-a-to-z/cnrs/qio
- Archived Informational Letters
 http://dhs.iowa.gov/ime/providers/rulesandpolicies/bulletins
- Informational Letter sign-up https://secureapp.dhs.state.ia.us/impa



- Centers for Medicare and Medicaid Services http://www.cms.gov/
- lowa Code and lowa Administrative Code (IAC):
 http://search.legis.state.ia.us/nxt/gateway.dll/ic?f=templates&fn=default.htm
- Provider Services: http://dhs.iowa.gov/ime/providers
 - imeproviderservices@dhs.state.ia.us
 - I-800-338-7909 (toll free) or 515-256-4609 (Des Moines) Select Option 4

